

EXHIBT 1

SEATING	Unit 1										Unit 2										Unit 3										SAFETY EQUIPMENT									
	1	2	3	4	5	6	7	8	9	10	1	2	3	4	5	6	7	8	9	10	1	2	3	4	5	6	7	8	9	10	01 - None Installed 02 - Not Applicable 03 - Unknown (Any Type) 04 - Lap Belt Only 05 - Not Fastened 06 - Lap/Shoulder Harness 07 - Not Used 08 - Shoulder Only Used 09 - Both Used 10 - Motorcycle Helmet 11 - Not Used 12 - Used									
VICTIMS	VERNELL B MORRIS Address: 16635 STEPHANIE ST BATON ROUGE LA Taken By: ALABAMA DEPT OF FORENSIC SCIENCES MONTGOMERY AL ALDFS EDWARD NEAL THOMPSON Address: 301 5TH AVENUE GENEVA AL Taken By: TALLASSEE COMMUNITY HOSPITAL TALLASSEE AL CARE AMBULANCE																																							
N/A	Injury Type: K Killed, B Bruised/Abrasion/Scrubbing, A - Visible or Carried Non Scene, C - Not Visible - Has Pain/Faint Ejected: N - Not, F - Folly, P - Partially, T - Trapped, U - Unknown, O - Other First Aid By: A - Ambulance Attended, D - Doctor, M - Paramedic, O - Other, P - Police, U - Unknown, R - Road																																							
CODES	Codes: 1 - Killed, 2 - Visible or Carried Non Scene, 3 - Not Visible - Has Pain/Faint, 4 - Not Visible - Has Pain/Faint, 5 - Not Visible - Has Pain/Faint, 6 - Not Visible - Has Pain/Faint, 7 - Not Visible - Has Pain/Faint, 8 - Not Visible - Has Pain/Faint, 9 - Not Visible - Has Pain/Faint, 10 - Not Visible - Has Pain/Faint																																							
NARRATIVE AND DIAGRAM	SEE SUPPLEMENTAL SHEET																																							
ROADWAY ENVIRONMENT	For Each Roadway Environment Field, Circle One Entry for Each Involved Unit: Unit 1: 1 - Buildings, 2 - Signboards, 3 - Trees, Crops, Bushes, 4 - Blowing Snow/Sand, 5 - Hillcrest, 6 - Curve in Road, 7 - Fog, 8 - Parked Vehicle, 9 - Moving Vehicle(s) Unit 2: 1 - Buildings, 2 - Signboards, 3 - Trees, Crops, Bushes, 4 - Blowing Snow/Sand, 5 - Hillcrest, 6 - Curve in Road, 7 - Fog, 8 - Parked Vehicle, 9 - Moving Vehicle(s)																																							
INVESTIGATION	Light: 1 - Daylight, 2 - Dusk, 3 - Darkness - Road Lit, 4 - Darkness - Road Lit Weather: 1 - Clear, 2 - Cloudy, 3 - Rain, 4 - Snow, 5 - Sleet/Hail, 6 - Thunderstorm, 7 - Fog, 8 - Other Locals: 1 - Open Country, 2 - Residential, 3 - Streets or Business, 4 - Hwy. or Industrial, 5 - School, 6 - Playground, 7 - Other Non-Vehicular Property Damage: 1 - None Visible, 2 - Light, 3 - Moderate, 4 - Severe Description: TRAFFIC CONTROL ROAD SIGN Owner: EAST ALABAMA PAVING COMPANY Address: OPELIKA ALABAMA Time Police Notified: 3:31 PM, Time Police Arrived: 4:04 PM, Time EMS Arrived: 4:07 PM, Name of Photographer: SGT. JAMES PATTERSON Witness Full Name: N/A, Address: N/A, Telephone: N/A Name of Investigating Officer: TROOPER ALEX F. HUNTLEY, Officer ID: 1109, Agency ORI: ALAST4300, Supervisor Reviewed: SGT. JAMES PATTERSON, Officer ID: 133, Agency ORI: ALAST0300 The data on this report reflects my best knowledge, opinions and beliefs covering the accident, but no warrant is made as to the factual accuracy thereof. Signature of Investigating Officer: Alex F. Huntley, Date: 09-07-04																																							

SUPPLEMENTAL SHEET

SHEET 2			OF 4			SHEET(S)		
No.	Pos.	Type	Age	Sex	Occupation	First	Last	Aid By
2	3	C	35	M	N	A		

3	Name WILLIAM TIDWELL	Address 1204 PETTY ROAD WESTVILLE FL								
	Taken to TALLASSEE COMMUNITY HOSPITAL TALLASSEE AL	Taken by CARE AMBULANCE								
4	Name N/A	Address								
	Taken to	Taken by								
5	Name	Address								
	Taken to	Taken by								
6	Name	Address								
	Taken to	Taken by								
7	Name	Address								
	Taken to	Taken by								
8	Name	Address								
	Taken to	Taken by								
9	Name	Address								
	Taken to	Taken by								
10	Name	Address								
	Taken to	Taken by								
11	Name	Address								
	Taken to	Taken by								
12	Name	Address								
	Taken to	Taken by								

ADDITIONAL ACCIDENT VICTIMS

ADDITIONAL NARRATIVE SPACE

DESCRIBE WHAT HAPPENED (Refer to vehicles by number) UNIT 1 WAS TRAVELING NORTHBOUND ON I-85.

UNIT 1 LEFT THE LEFT SIDE OF THE ROADWAY, WENT DOWN AN EMBANKMENT, STRUCK A ROAD SIGN, STRUCK A DRAINAGE DITCH, WENT UP AN EMBANKMENT, CAME DOWN AN EMBANKMENT, STRUCK A DRAINAGE DITCH, WENT UP AN EMBANKMENT, OVERTURNED ON THE DRIVER'S SIDE, CAME BACK ONTO THE ROADWAY BLOCKING BOTH LANES OF NORTHBOUND I-85, AND IS STRUCK BY UNIT 2 TRAVELING NORTHBOUND ON I-85. AT THE TIME OF THE COLLISION DRIVER OF UNIT 2 ADVISED HE WAS UNABLE TO SEE UNIT 1 IN THE ROADWAY. INVESTIGATION REVEALED THAT AT THE TIME OF THE COLLISION DUE TO THE POSITIONING OF UNIT 1 UPON COMING BACK ONTO THE ROADWAY THE BOTTOM OF THE UNDERCARRIAGE WAS THE ONLY PART OF THE VEHICLE THAT COULD HAVE BEEN SEEN BY THE DRIVER OF UNIT 2. UNIT 1 WAS FURTHER TRANSPORTING TITANIUM DIOXIDE IN DRY BULK FORM. THERE WERE 22 PALLETS OF TITANIUM DIOXIDE R101-04 WITH A WEIGHT OF 2000 POUNDS EACH. THE FREIGHT WAS BEING DELIVERED TO THE STANDRIDGE COLOR CORPORATION IN SOCIAL CIRCLE GEORGIA. NONE OF THE MATERIAL WAS SPILLED NOR WERE ANY OF THE PACKAGES RUPTURED OR DAMAGED. THE MATERIAL REQUIRED PROPER HANDLING AND STORAGE DUE TO ITS POTENTIAL TO BECOME HAZARDOUS. ALL HANDLING AND STORAGE WAS DONE BY THROWER'S WRECKER SERVICE.

Unit No.

(Same as on main report)

Alabama Uniform Traffic Accident Report

Truck/Bus Supplemental Sheet

Sheet 3 of 4 Sheets

General Instructions

Complete this form for each qualifying vehicle ONLY if the accident meets BOTH of the following criteria:

1. The accident involved a qualifying vehicle (truck with 6 or more tires or Haz/Mat placard, or a bus designed to carry 16 or more, including driver) and;
2. The accident resulted in at least one of the following: A. one or more fatalities B. one or more persons injured and taken from the scene for immediate medical attention, or C. one or more involved vehicles had to be towed from the scene as a result of disabling damage or had to receive assistance to leave.

Screening Information

Number of Qualifying Vehicles:

Trucks with 6 or more tires or Haz/Mat placard 2

Buses designed to carry 16 or more (including driver) _____

Number of vehicles towed from scene due to damage or provided assistance 2

Number of Persons:

Sustaining fatal injuries 1Transported for immediate medical treatment 2

Vehicle Information

Gross Vehicle Weight Rating (GVWR)

A. Truck, tractor or bus 17000B. Trailer or trailers (total) 55000Total GVWR for unit (A+B) 72000

Hazardous Material Involvement

Did vehicle have a Haz/Mat placard Yes ☒ No

If Yes, include following information from placard

A. Name or 4-digit number from diamond or box NAB. The 1-digit number from bottom of diamond NAWas hazardous material released from THIS vehicle's cargo? Yes ☒ NoTotal number of axles 5

Vehicle Configuration (circle one number)

1. Bus 2. Single unit truck (2 axles/ 6 or more tires) 3. Single unit truck (3 or more axles)
 4. Truck with trailer 5. Truck tractor only (bobtail) 6. Tractor with semi-trailer 7. Tractor with double trailers
 8. Tractor with triple trailers 9. Unknown class heavy truck 0. Any other 4-wheeled vehicle

Cargo Body Type (circle one number)

1. Bus 2. Van/enclosed box 3. Cargo tank 4. Flatbed 5. Dump
 6. Concrete mixer 7. Auto transporter 8. Garbage/ refuse 9. Other _____

Motor Carrier Information

NOTE: If NOT a motor carrier, enter NONE under Carrier Name, 0 for None under Carrier Identification Numbers, and go to Sequence Of Events Section

Carrier Name FLORIDA TRANSFORMER

Source (circle one number) 1. Vehicle side 2. Shipping papers 3. Driver 4. Other

Carrier mailing address (Street or P.O. Box) PO BOX 507City, State, Zip DEFUNIAK SPRINGS FLORIDA 32435

Carrier Identification Numbers (____ None = 0)

US DOT 160401 ICC MC _____ STATE NO. _____ STATE _____

/ Sequence of Events

Note: for this vehicle - list up to four

Event #1 10 Event #2 _____ Event #3 _____ Event #4 _____

EVENT CODES

- Non-Collision 1. Ran off road 2. Jackknife 3. Overturned (rollover) 4. Downhill runaway
 5. Cargo loss or shift 6. Explosion or fire 7. Separation of units 8. Other non-collision
 Collision With 9. Pedestrian 10. Non-parked vehicle 11. Parked vehicle 12. Train
 13. Pedalcycle 14. Animal 15. Fixed object 16. Other object

Signature of Reporting Officer

Officer ID

Reporting Police Agency ORJ

Date

Time

AM

PM

NY

1109

ALAST4300

09-02-2004

3:25

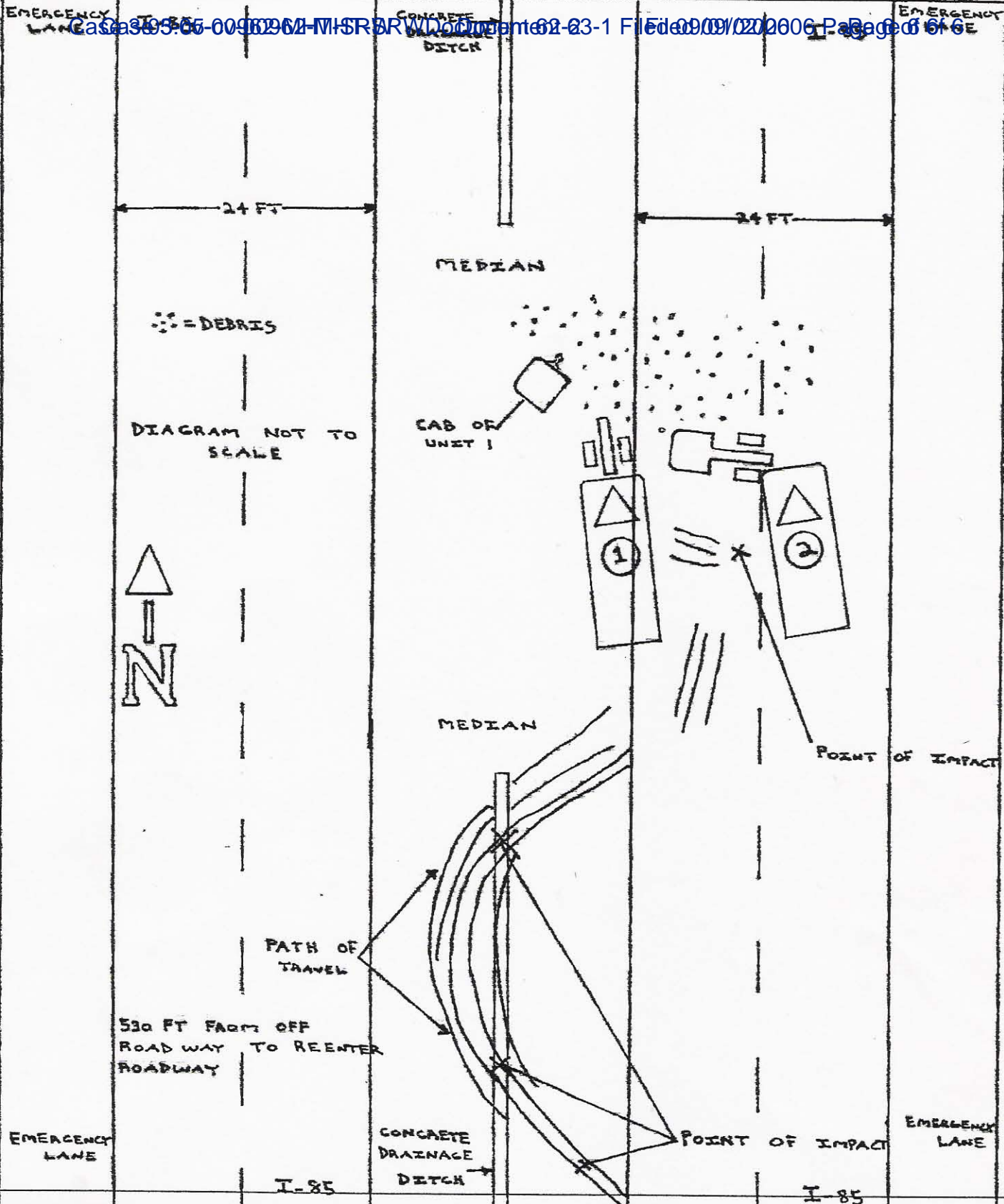


Diagram Not to Scale Diagram Scale 1 inch = (10 feet) / (20 feet)	Location MACON COUNTY	Time 3:25 P.M.
Signature of Reporting Officer Alex S. Hentley	Officer ID 1109	Reporting Police Agency ORI ALAST4300
		DATE Month 09 Day 02 Year 2004